

# Fire Alarm System Permit

## City of Menomonie

Date: \_\_\_\_\_

Contractor: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

**Estimated Cost of Project:** \$ \_\_\_\_\_

**Property Owner:** \_\_\_\_\_

**Property Address:** \_\_\_\_\_

Type of Work: \_\_\_\_\_

\_\_\_\_\_

### Permit Fees

New Fire Alarm System: \$100.00

Alteration of Existing Fire Alarm System: \$ 50.00

New Fire Sprinkler Monitoring Panel: \$ 50.00

Check Payable to: City of Menomonie

MAIL CHECK AND APPLICATION TO:

CITY INSPECTION DEPARTMENT  
800 WILSON AVENUE  
MENOMONIE WI 54751-2795

[www.menomonie-wi.gov](http://www.menomonie-wi.gov)

Telephone: 715-232-2241 Fax Number: 715-235-0888

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